

Site: Redley  
Break: 1.8



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION  
01 STATE SC 02 SITE NUMBER D980799464

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) McAbee/Atkins Site		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER Crd S-11-15 Cherokee County			
03 CITY Gaffney	04 STATE SC	05 ZIP CODE 29340	06 COUNTY Cherokee	07 COUNTY CODE 21	08 CONG DIST
09 COORDINATES LATITUDE 34° 56' 26.9"		LONGITUDE 081° 35' 55.2"			

10 DIRECTIONS TO SITE (Starting from nearest public road)  
South from Gaffney on State Highway 18 to State Highway 211 on the left; turn left, go 0.2 mile, turn left on County Road S-11-15, go approx. 1.5 miles on left. See map attached.

III. RESPONSIBLE PARTIES

01 OWNER (If known) Donald McAbee		02 STREET (Business, mailing, residential) Rt. 6, Box 638			
03 CITY Gaffney	04 STATE SC	05 ZIP CODE 29340	06 TELEPHONE NUMBER ( )		
07 OPERATOR (If known and different from owner)		08 STREET (Business, mailing, residential)			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ( )		
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input type="checkbox"/> A. RCRA 3001 DATE RECEIVED: ____/____/____ MONTH DAY YEAR <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: ____/____/____ MONTH DAY YEAR <input checked="" type="checkbox"/> C. NONE					

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 08/26/82 MONTH DAY YEAR <input type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____			
02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION BEGINNING YEAR + 1974 ENDING YEAR <input checked="" type="checkbox"/> UNKNOWN			
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED Alleged buried drums of chemicals.					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION High potential for ground-water contamination.					

V. PRIORITY ASSESSMENT

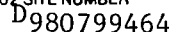
01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)  
☒ A. HIGH (Inspection required promptly)    ☐ B. MEDIUM (Inspection required)    ☐ C. LOW (Inspect on time available basis)    ☐ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT John Cresswell		02 OF (Agency/Organization) DHEC		03 TELEPHONE NUMBER (803) 758-5681	
04 PERSON RESPONSIBLE FOR ASSESSMENT William L. Buffington, Jr.		05 AGENCY EQC	06 ORGANIZATION SCDHEC	07 TELEPHONE NUMBER (803) 596-3800	08 DATE 09/10/84 MONTH DAY YEAR



10896857



## EPA FORM 2070-12 (7-81)



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER  
SC D980799464

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☒ A. GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☒ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: unknown 04 NARRATIVE DESCRIPTION

01 ☒ B. SURFACE WATER CONTAMINATION 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☒ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: unknown 04 NARRATIVE DESCRIPTION

01 ☐ C. CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ E. DIRECT CONTACT 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☒ F. CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☒ POTENTIAL ☐ ALLEGED  
03 AREA POTENTIALLY AFFECTED: unknown  
(Acres) 04 NARRATIVE DESCRIPTION

01 ☐ G. DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ H. WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 WORKERS POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ I. POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION



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PRELIMINARY ASSESSMENT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER  
SC D980799646

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA  
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☒ M. UNSTABLE CONTAINMENT OF WASTES  
(Spills/runoff/standing liquids/leaking drums)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☒ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: unknown

04 NARRATIVE DESCRIPTION

01 ☐ N. DAMAGE TO OFFSITE PROPERTY  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

01 ☒ P. ILLEGAL/UNAUTHORIZED DUMPING  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: 7/26/82)

☐ POTENTIAL

☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)